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ABSTRACT

This 7th annual Kids Count Factbook provides information on trends in the well-being of children in Maryland and its 24 jurisdictions. The statistical portrait is based on 18 indicators of well-being: (1) low birth-weight infants; (2) infant mortality; (3) early prenatal care; (4) binge drinking; (5) child deaths; (6) child injury rate; (7) grade 3 reading achievement; (8) violence-related school suspensions; (9) absence from school; (10) on-time high school graduation; (11) high school program completion; (12) teen death rate; (13) child abuse and neglect; (14) juvenile non-violent crime arrests; (15) juvenile violent crime arrests; (16) child poverty; (17) child support; and (18) births to teens. The Factbook provides indicator definitions, and summarizes findings for the state level and jurisdictional level for each indicator. The data indicate improvement in measures for infant mortality, prenatal care, child deaths, grade 3 reading, school absences, high school graduation and program completion, child abuse and neglect, juvenile crime, child support collection, and births to teens. Indicators showing a worsening trend are low birth-weight births, binge drinking, violence-related school suspensions, and child poverty. (HTH)

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Maryland Kids Count Factbook, 2001.

Maryland Kids Count Partnership
Advocates for Children and Youth, Inc.

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Our Vision

Maryland's children will have opportunities to achieve their full potential. They will reach adulthood having experienced a safe, healthy and nurturing childhood. Children in Maryland will have opportunities to grow physically, intellectually, emotionally and socially. They will be prepared to become responsible, self-sufficient and contributing members of the community.

Executive Summary

The Seventh annual Maryland KIDS COUNT Factbook provides information on 18 measures of child well-being our State and its' 24 jurisdictions. By highlighting trends and comparing jurisdictions, the Maryland KIDS COUNT Partnership educates Marylanders about the condition of all the children in our communities and encourages action from both the public and private arenas to shape policy and legislation for the betterment of Maryland's children.

At the beginning of the new decade our data analysis finds conditions are generally better for children in Maryland than at the beginning of the 1990's . Eleven out of the sixteen available indicators analyzed for this book showed some improvement over baseline.

Several health related indicators have demonstrated remarkable improvement during the past ten years. Infant mortality has decreased by 14% to 8.3 deaths per 1,000 live births since 1990. The child death rate has declined by one-quarter between 1990 and 1999 from 27.4 deaths per 100,000 to 20.6 per 100,000. For white children the child death rate has decline by a dramatic 37% since 1990. The percentage of births with prenatal care initiated during the first trimester has improved by 4% over baseline to its current rate of eighty-four percent.

Juvenile crime arrests are also moving in the right direction. The 2001 analysis of these data reveal significant reductions in both the juvenile violent arrest rate and juvenile non-violent arrest rate. The violent crime arrest rate has fallen by 6% over baseline to 54.5 arrests per 10,000 youths, and by 25% over its peak in 1996 of 71.3 arrests per 10,000 ages 10-17. The magnitude of the decrease in the non-violent arrest rate is even greater with the rate having declined 27% since 1990 from 296 arrests per 10,000 to 215 arrests per 10,000 in 1999.

There were also improvements in several of the education and economic indicators. Both third grade reading and high school program completion had increases over baseline of greater than 30%. However, while third grade reading does demonstrate positive change over baseline the percentage of third graders scoring satisfactory on MSPAP has been essentially unchanged since for the past three years. School absence has decreased by 15% over baseline to its' current rate of 20.3%. With regards to economic indicators, the teen birth rate dropped by 20% between 1990 and 1999 from 53.2 per 1,000 females 15-19 to 42.5 per 1,000 females 15-19. The percent of paying child support cases has made remarkable progress in the last few years increasing by 96% over baseline, from 34.1% in 1993 to 67% in 2000.

While there is a great deal of promising news to report there are also some disturbing trends. Maryland's rate of babies born with low birthweight continues on its' upward path, increasing by almost 5% between 1998 and 1999 alone. Over the past decade this rate has increased by 17% from 7.8% in 1990 to 9.1% in 1999. Maryland's rate is 20% higher than the national rate which is also trending upward.

There is also troubling news to report with regard to child poverty and violence-related school suspension. The most recent poverty estimates indicate a 32% increase in the child poverty rate between 1989 and 1997 from 11.3% to 14.9%. School violence has increased by more than 12% since baseline. However,

although there is an increase over baseline it is worth noting that this rate appears to be on a downward trend having declined by 14% in the past three years.

Another distressing finding is the enduring racial disparity between white and African American Marylanders. On every indicator where it is possible to analyze data by race significant disparity is found between white children and African American children. For example, the rates of low birthweight and infant mortality for African American babies are two times and three times the rates for white babies, respectively. In 1999, only 73% of African American women received prenatal care during the first trimester of their pregnancy's while for white women the rate was 90% . During the 1990's the child death rate for white children decreased by 37%, while for African American children the rate decreased by only 2% and continues to be more than double the rate for white children.

The data within the pages of this book clearly indicate that there has been meaningful improvement in the well-being of our children during the past ten years. In the main Maryland's children are healthier, safer and more prepared for adulthood. However, these data also indicate that in some areas Maryland still has serious room for improvement, and that some of our most vulnerable children are not enjoying the aforementioned improved standard of living. Maryland has the highest median income in the country for a family with children. We have the means to work even harder to make the health, safety and happiness of our children our highest priority.

Status of Our Children

Why This Book?

The Maryland 2001 Factbook presents the seventh comprehensive look at the conditions of children and families in Maryland. The factbook measures how well or how poorly children are doing by presenting the best available data to monitor the social, economic, educational and physical well-being of Maryland=s children. This Factbook provides a detailed state and county level picture of the quality of life of Maryland=s children.

The Factbook is an important tool in educating the public and decision-makers on the status of children in Maryland. It builds a strong and effective case for improving measurable outcomes for Maryland=s children. It is our hope that the increased awareness resulting from the presentation of these data will prompt the interest of all Marylanders to work toward improving the quality of life for our children. This can be done by working together toward public and private solutions to the present and future crises our children face.

What=s New in the 2001 Maryland KIDS COUNT Factbook?

Getting to Results

A new section was added to the Maryland KIDS COUNT Factbook last year which provided an overview on what results-based budgeting is, why it is important and what Maryland is doing to implement it. Maryland KIDS COUNT continues to explore this in the 2001 Maryland KIDS COUNT Factbook by studying the prototype for results-based budgeting being developed by the Joint Committee on Children, Youth and Families for use by the legislature and executive branches in their decision-making progress. This section now includes newly released data on school readiness.

The Managing for Results Database

The new AGetting to Results≅ section in the 2000 Maryland KIDS COUNT Factbook outlined the Managing for Results Initiative which is being phased in as a part of the shift to results-based budgeting. This year the Factbook goes one step further and has included a database developed by Advocates for Children and Youth based on the current Managing for Results submissions by the agencies in the Subcabinet for Children, Youth and Families.

Missing Data

In 2000, The Maryland Department of Mental Hygiene was required to overhaul their data coding system to reflect the migration of the Centers of Disease Control from the International Classification of Diseases Version 9 to the newly updated version 10. This change is significant and affects our ability to compare data from 1999 to data prior to 1999. In the future, it will be possible to manipulate these data to make possible to compare them, however the necessary comparability ratios have yet to be calculated by the National Center for Health Statistics. Because of this, two KIDS COUNT indicators, teen violent death and child injury cannot be included in this years Factbook.

2001 Maryland Kids Count Fact Sheet: Maryland

Results & Indicators	Then			Now			Trend
	No.	Rate	Base Year	No.	Rate	Base Year	
Result: Babies Born Healthy							
Low Birth Weight(weighing less than 5.5 lbs.)	6,179	8.5%	1995	6,515	9.1%	1999	Worse
Infant Mortality Rate (per 1,000 live births)	3,656	9.5	1990-94	3,049	8.5	1995-99	Better
Early Prenatal Care	60,783	75.8%	1990	60,082	83.7%	1999	Better
Result: Healthy Children							
Binge Drinking	-	19.9%	1992	-	26.4%	1998	Worse
Child Death Rate(ages 1-14, per 100,000 children)	1,409	28.3	1990-94	1,165	23	1995-99	Better
Injury Rate (per 1,000 students)	4,671	33.6	1995		N/A		
Result: Children Sucessful in School							
3rd Gr. Reading*	-	19.9%	1992	-	39.2%	2000	Better
Violence Related Suspensions (per 1,000 students)	27,588	37.5	1992-93	35,583	42	1999-00	Worse
Absence From School	-	23.8%	1993	-	20.3%	2000	Better
Result: Children Completing School							
On Time Graduation	-	72.8%	1989-90	-	74.0%	1999-00	Better
H.S. Program Completion**	-	43.5%	1991	-	57.7%	2000	Better
Result: Children Safe in Their Families and Communities							
Teen Death Rate (ages, 15-19, per 100,000 teens)	1,012	66.5	1990-94		N/A		
Child Abuse & Neglect (per 1,000 children)	9,555	8.2	1990	8,065	6.7	2000	Lower
Juvenile Non-Violent Crime Arrest Rate (per 10,000)	13,881	296.2	1990	11,789	214.7	1999	Better
Juvenile Violent Crime Arrest Raate (per 10,000)	2,708	57.8	1990	2,991	54.5	1999	Better
Result: Stable and Economically Independent Families							
Child Poverty	128,523	11.3%	1989	194,703	14.9%	1997	Worse
Child Support	82,593	34.1%	1993	142,957	60.7%	2000	Better
Birth to Teens (ages 15-19, per 1,000 female teens)	7,194	47.7	1995	7,227	42.5	1999	Better

*percent of students scoring satisfactory or above in the Maryland School Performance Assesment Program test

**percent of students meeting minimal requirements for the University of Maryland School System

(Excerpts form the 2001 Maryland KIDSCOUNT Factbook)

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Building a Prototype for Results-Based Accountability in Maryland

Focusing on Results

Maryland is changing the way it plans and budgets for the well being of children and families. Rather than measure success in traditional measures, such as the number of children and families that pass through programs or the size of agencies' budgets, the State is beginning to focus more on the actual conditions of well being, or "results," that we want for our children and families.

In January 1999, "Maryland's Results for Children, Youth and Families" – eight priority results – were announced by the Maryland Partnership for Children, Youth and Families, chaired by Lt. Governor Kathleen Townsend. Soon thereafter, the 1999 Maryland General Assembly created the Joint Committee on Children, Youth and Families. In October 1999, the Joint Committee, co-chaired by Del. Mark Shriver and Sen. Ed Kasemeyer, set out to develop a prototype results-based process for the legislature and executive branches to follow in planning, budgeting and accounting for the well being of children and families.[1] The Joint Committee selected "Children Entering School Ready to Learn" as the result upon which it would focus in developing its prototype.

An "Unprecedented" Joint Budget Hearing on School Readiness

The Joint Committee's development of a prototype culminated in February 2001 with a Joint Budget Hearing on School Readiness, held by the Senate Budget and Tax Committee and two House of Delegates Appropriations' Subcommittees, Education and Economic Development and Health and Human Resources. Sen. Barbara Hoffman, Chair of the Senate Budget and Tax Committee and a leading member of the Joint Committee on Children, Youth and Families, observed that the Joint Budget Hearing was "unprecedented in Maryland and, as far as we can tell, in this country."

> ***"This joint budget hearing is unprecedented in Maryland and, as far as we can tell, in this country."*** Sen. Barbara Hoffman, Chair, Senate Budget and Tax Committee, February 26, 2001

At the Joint Budget Hearing, budget analysts from the Department of Legislative Services (DLS) explained the distinction between traditional budgeting in Maryland and the new, results-based approach:

"Typically budget hearings focus on programs or groups of programs as they are organized administratively, for example, a single department or part of a larger department. They are also typically concerned with the immediate upcoming budget year rather than having a longer-term strategic planning focus. This hearing focuses instead on … strategies outlined by the [Subcabinet for Children, Youth and Families] to positively move [measures of] school readiness. It includes an identification of dollars most directly targeted to the

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achievement of stated results regardless of the specific agency or source of those funds.[2] In this way, the legislature has the opportunity to:

- Take a holistic view of those programs, dollars, and policies that the State is utilizing to achieve a common goal. This is done in the context of one meeting rather than being spread across numerous agency budget hearings. Integrating all of the programs related to this result in one analysis provides … the opportunity to assess how these programs interact with one another (e.g., if and how they are coordinated …);

- Focus on not only what is in the proposed budget but also on long-term strategic questions (five years out) and about how to move the State's performance in this result area from where we are to where we want to go.

- Focus attention on initiatives that have an important impact but which may be normally considered as part of larger programs which dwarf them in size and thus deflect attention; and

- Have all the appropriate parties at the table when addressing this result area."[3]

DLS also noted, by comparison, that Managing for Results (MFR), an agency-focused attempt to move the State's budgeting process into a more strategic framework, rarely moves an agency beyond the immediate fiscal year or links it with other agencies in seeking to achieve results.

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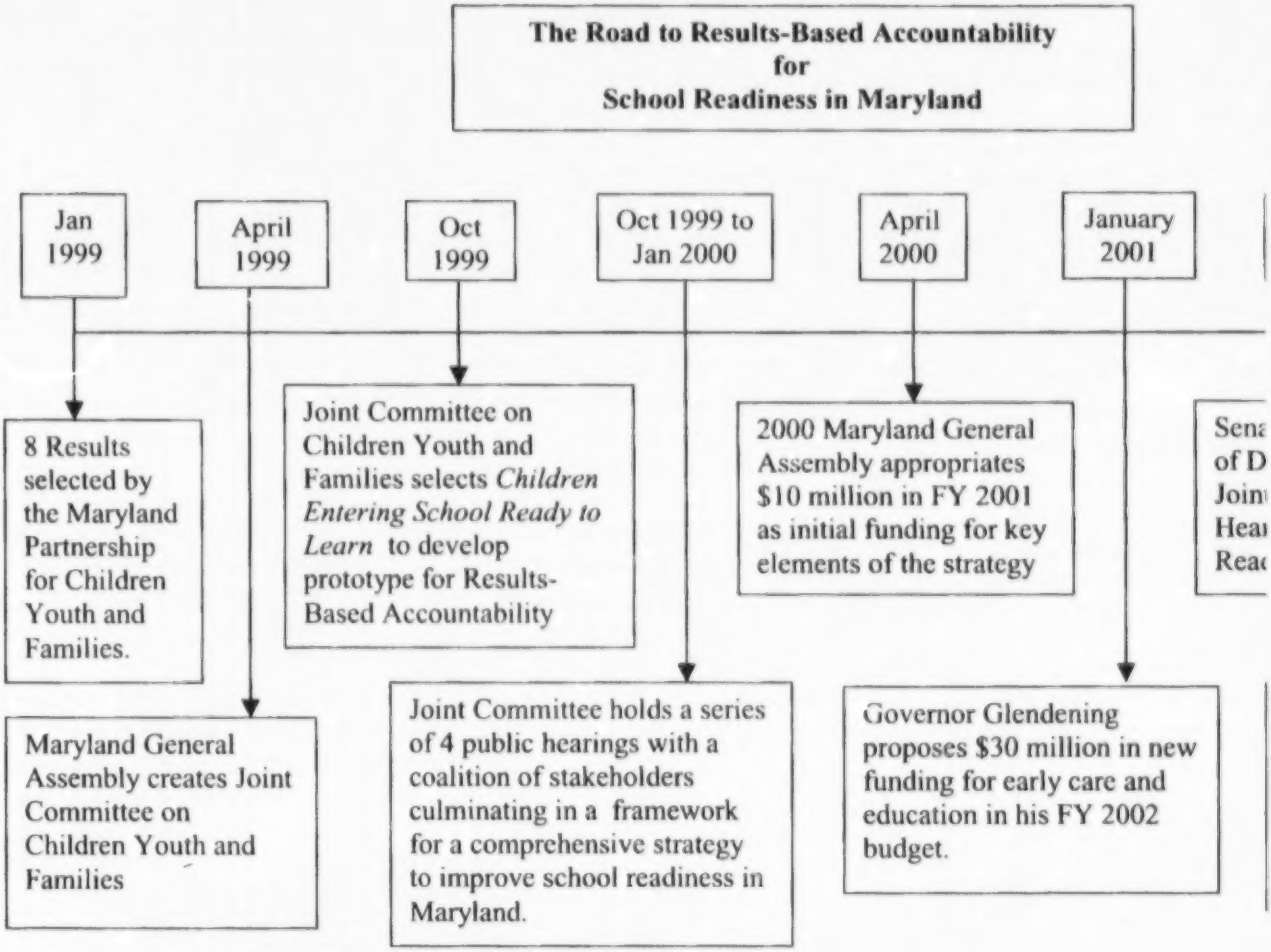
The Road to Results-Based Accountability
for
School Readiness in Maryland
Jan 1999
April 1999
Oct 1999
Oct 1999 to Jan 2000
April 2000
January 2001
8 Results selected by the Maryland Partnership for Children Youth and Families.
Maryland General Assembly creates Joint Committee on Children Youth and Families
Joint Committee on Children Youth and Families selects *Children Entering School Ready to Learn* to develop prototype for Results-Based Accountability
Joint Committee holds a series of 4 public hearings with a coalition of stakeholders culminating in a framework for a comprehensive strategy to improve school readiness in Maryland.
2000 Maryland General Assembly appropriates $10 million in FY 2001 as initial funding for key elements of the strategy
Governor Glendening proposes $30 million in new funding for early care and education in his FY 2002 budget.

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The Prototype for Results-Based Accountability in Maryland – Key Questions

The Joint Committee's prototype approach to planning and budgeting was adopted by the Subcabinet for Children, Youth and Families in framing a strategy to improve school readiness in Maryland and by the budget committees for the 2001 Joint Budget Hearing on School Readiness. The prototype may be most readily understood as a series of questions that are asked on a regular, ongoing basis.

The Results-Based Prototype: Key Questions

1. What is the result (condition of well being) we want for our children, youth and families? (In the case of the prototype, the result is "Children Entering School Ready to Learn" or "school readiness")
2. How are we doing with respect to school readiness in Maryland?
3. What are the causes and forces at work that explain our current situation with respect to school readiness?
4. What will it take to improve the current status of school readiness?
   - Who are the partners who have a role to play?
   - What has worked elsewhere?
   - What are no-cost or low-cost strategies?
5. What will be the cost if we do nothing – the "cost of bad outcomes"?
6. What is our strategy – our action plan and budget – to improve school readiness?
7. How will we know if the different elements of our strategy, including individual programs, are working?

What follows is a brief description of how each of these questions was answered from October 1999 to February 2001 as the results-based prototype was developed and implemented in Maryland.

1. What is the result (condition of well being) we want for our children, youth and families?

As noted above, the Joint Committee for Children, Youth and Families chose to initially devote its energy to one result area: "Children Entering School Ready to Learn." This result was defined as children entering school having achieved the developmental milestones that enable them to pay attention, communicate, work and play with others, solve problems, behave appropriately, use reason, and be creative.

2. How are we doing with respect to school readiness in Maryland?

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The Joint Committee wanted measurements by which the State could track its progress in achieving school readiness. Maryland had been tracking enrollment in preschool programs; however, such measures did not tell whether children were actually entering school ready to learn. Therefore, the Joint Committee selected the Work Sampling System (WSS), a component of a school readiness program being developed by the Maryland State Department of Education (MSDE), to help gauge the social, physical, linguistic, and cognitive skills of children entering kindergarten statewide. Preliminary results from the WSS were presented by the Department of Legislative Services at the 2001 Joint Budget Hearing:

> "Overall composite scores [from the Work Sampling System] indicate a mediocre performance with 40% of children deemed ready, 50% identified as requiring some supports to succeed in kindergarten, and 10% requiring considerable support to succeed in kindergarten."[4]

While the first WSS data are preliminary, they represent a fundamental change in the State's approach to school readiness. As Del. Mark Shriver noted, "the Joint Committee has changed the equation in Maryland; up until now we had not confronted the fact that a system that does not measure and report whether its children are entering school ready to learn is inherently unaccountable."

> *"The Joint Committee has changed the equation in Maryland; up until now we had not confronted the fact that a system that does not measure and report whether its children are entering school ready to learn is inherently unaccountable."* Delegate Mark K. Shriver, Presiding Chair, Joint Committee on Children, Youth and Families.

3. What are the causes and forces at work that explain our current situation with respect to school readiness?

It is not enough, however, to collect data and plot trendlines or "curves" with the data. A focus on results requires that the causes and forces underlying the curves ("the story behind the curve") be analyzed and understood as a prerequisite to the development of a strategy, action plan, and budget that, ultimately, will improve school readiness (or "turn the curve").

To this end, in January 2000, the Subcabinet on Children, Youth and Families discussed several negative forces working against Maryland's children: inadequate availability of quality early childhood experiences; poverty; health issues; and systemic issues that create barriers to a fully integrated system to address the needs of children and families.[5] Similarly, in the February 2001 Joint Budget Hearing, DLS cited key issues: inadequate compensation for child care workers; a shortage of infant child care slots; oversight of early childhood programming that does not offer parents much assurance about the quality of the experiences; increased percentages of low-birth weight babies; shortages of residential slots in substance abuse programs for mothers and their young children; and between 20% and 30% of children with family incomes below 200% of poverty that do not have health insurance.[6]

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In addition, the Subcabinet and DLS both noted that the recent convergence of neurological studies of early brain development and longitudinal studies of the long-term impact of early childhood experiences indicates that brain development is much more vulnerable to environmental influences than formerly suspected, especially in the earliest years.

4. What will it take to improve the current status of school readiness?

- **Who are the partners who have a role to play?**
- **What has worked elsewhere?**
- **What are no-cost or low-cost strategies?**

- **Who are the partners who have a role to play?**

In developing its prototype, the Joint Committee brought together all of those state agencies and programs that impact school readiness. The Joint Committee also reached beyond the public sector, inviting representatives from non-profit service agencies, the faith community, advocates, and businesses to participate in its hearings. The Joint Committee asked the Subcabinet to include those stakeholders in framing a comprehensive strategy to improve school readiness.

- **What has worked elsewhere?**

Both the Subcabinet and DLS cited studies that demonstrate the lasting effect of high quality, full-time early childhood education. DLS went on to note, however, that the impact of early intervention has often been found to be disproportionately larger for more disadvantaged children and that, similarly, disadvantaged children suffer disproportionately from exposure to low quality care. Citing a number of studies, DLS also noted that there appear to be some common components which are suggestive of successful programs: more intensive interventions (all-day, year round); quality trained providers; and quality interactions. DLS concluded: "(1) Targeting disadvantaged families, (2) encouraging parental involvement; and (3) reducing high school drop-out and adolescent pregnancy rates appear to be the most promising solutions to the differential in outcomes highlighted in the study."[7]

- **What are no-cost or low-cost strategies?**

This question goes to the heart of Results-Based Accountability. It challenges the assumption that "turning curves" is solely a function of increased funding, asking bureaucracies and communities alike to critically evaluate and change as necessary currently funded programs and activities. This question, however, received little attention in the Subcabinet's strategy, other than a brief discussion of the Subcabinet's plans to work on results-based budgeting and to improve collaborations among state agencies and with its provider and advocate partners.

5. What will be the cost if we do nothing – the "cost of bad outcomes"?

This question seeks to surface and make explicit from a fiscal perspective the costs of not investing in children, youth and families or, in more positive terms, the potential savings from such investments. In the Joint Budget Hearing, DLS presented an exhibit highlighting State

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spending on programs seeking to counteract "bad early childhood outcomes." The list, offered as a proxy for estimating the potential savings for Maryland from investing in new or expanded childhood intervention programs, included expenditures on dropout prevention, special education, disruptive youth, the Department of Juvenile Justice, academic interventions and Youth Service Bureaus. The total FY 2002 "Spending to Counteract 'Bad Outcomes'" was almost $600 million. DLS noted that the list was by no means comprehensive in that it excluded spending on welfare programs for teen moms and compensatory education and excludes spending in the adult years resulting from bad outcomes, including prison spending, food stamps, and Medicaid.

It is, of course, critically important that when the State does realize savings from investing in children and families, the State uses those savings to continue to fund such investments rather than putting those savings in the State's General Fund.

6. What is our strategy – our action plan and budget – to improve school readiness?

At the urging of the Joint Committee, the Subcabinet developed and presented a set of four overarching strategies, each with a series of goals, to promote school readiness:

- Improve Quality of Child Care and Early Childhood Experience
- Increase Access to Early Childhood Experiences
- Support Families with Young Children
- Increase Access to Health Care and Early Childhood Health Screening

The strategies were analyzed by DLS at the Joint Budget Hearing, with the first two strategies receiving a more in-depth review. DLS offered a series of overarching conclusions on the strategies, including:

- credentialing child care workers and accrediting child care centers and family day care homes is an important first step to improve the quality of early child care;
- the Subcabinet's strategies are not sufficient to address the compensation issue;
- given limited resources available for early childhood programs, it is most appropriate to target funds to at-risk children and families rather than provide universal services;
- the early childhood system lacks a single point of entry; and
- barring a substantial infusion of funding into early childhood programs, the State should probably choose between focusing the majority of its resources on either improving quality or expanding pre-school opportunities for three-and-four-year-olds.

In the two years since the Joint Committee began its work (Fiscal Years 2001 and 2002), the State will have invested $40 million in new funds (including some federal funds) in early childhood care and education. These investments focus on a number of the strategies discussed above and together constitute what has been described as a national model.

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Maryland's Investments in Early Childhood Care and Education

- Judy Centers – high quality educational programming for children and comprehensive services for families. Approximately 20 new Centers will be funded in communities across the state
- Broad-based effort to increase number of programs formally accredited
- State credentialing system and incentives for early childhood care and education providers to increase their credentials
- Establishment of a Blue Ribbon task force to address the long-term financing of early childhood care and education
- Increased funding for home visiting programs
- A public education campaign on early childhood care and education
- $19 million in flexible funds to local jurisdictions available to improve early childhood care and education

7. How will we know if the different elements of our strategy, including individual programs, are working?

A focus on results requires that, at the program level, we look beyond traditional measures of effort or activity, to gauge also whether the clients of a program have achieved those client outcomes the program was meant to influence. For example, a prenatal education program for expectant mothers would track not only the attendance and graduation of the mothers from the program but also whether those mothers gained the desired knowledge about prenatal care, practiced and obtained appropriate prenatal care, and had healthy births.

At the same time, separate and distinct from tracking such client outcomes is the challenge of evaluating the actual impact of a program on such outcomes. At the 2001 Joint Budget Hearing, DLS reported that few programs submitted evaluations. The State's largest investment in early childhood programming, EEEP, has not had an evaluation since 1991. The new Judy Centers, however, require and provide funding for evaluations. The Judy Centers also have a set of outcome measures. DLS recommended, and the Subcabinet concurred, that similar outcome measures by developed for the State's EEEP program. DLS summed up its discussion by saying the State is doing "mediocre" in the area of evaluations.

Developing and Implementing a Prototype for Results-Based Accountability: Next Steps

The State has, over the course of 17 months, developed and implemented a prototype approach to results-based accountability. While much remains to be done and improved, a framework built upon key questions has been established. Two critical steps must be taken to continue the institutionalization of this approach. First, the 2002 General Assembly should hold a second Joint Budget Hearing on School Readiness. At the same time, the Joint Committee should select a second result area in which to apply the prototype over the interim and in the 2002 General Assembly. This step will move Maryland toward the day when each of the eight result areas will, on an ongoing basis, be the subject of a sustained focus on and

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accountability for results. With such a focus and accountability, we can envision a Maryland in which communities support family life, children are born healthy, stay healthy, enter school ready to learn, succeed in and complete school, live with stable and economically independent families, and reside safely in their families and communities.

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2. *Response to Analysis for Children Entering School Ready to Learn, FY 2002 Budget, 2001 General Assembly*, Subcabinet for Children, Youth, and Families.

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5. *Results and Performance Accountability, The Fiscal Policy Institute Home Page*, Mark Friedman, Director, http://www.resultsaccountability.com

6. *Subcabinet for Children, Youth, and Families Presentation to the Joint Committee on Children, Youth, and Families*, January 20, 2000, Annapolis, Maryland

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Notes

[1] Technical assistance to the State in developing the prototype for results-based accountability was provided by Mark Friedman, of the Fiscal Policy Studies Institute, and Phil Lee, of the Maryland School of Public Affairs, both with support from the Annie E. Casey Foundation.

[2] The number of dollars targeted for school readiness in the analysis for the Joint Budget Hearing on School Readiness does not include all of the dollars that could impact this result area. The reasoning for the choice of programs included in the analysis is outlined by DLS in the Children Entering to School Ready to Learn Fiscal 2002 Budget Overview (pp. 6-7).

[3] Children Entering School Ready to Learn Fiscal 2002 Budget Overview, February 2001 (pp. 5-6).

[4] Children Entering School Ready to Learn Fiscal 2002 Budget Overview, February 2001 (p 24).

[5] Subcabinet for Children, Youth, and Families Presentation to the Joint Committee on Children, Youth, and Famlies, January 20, 2000 (pp. 12-15).

[6] Children Entering School Ready to Learn Fiscal 2002 Budget Overview, February 2001 (pp. 2-3. 12-21).

[7] Children Entering School Ready to Learn Fiscal 2002 Budget Overview, February 2001 (pp. 27-8).

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Using KIDS COUNT Data to Perform Your Own Analysis

Contained within the pages of the Kids Count Factbooks are a wide array of data presented in many different forms. For your benefit we have analyzed these data to convey how children in our state are faring at the state and county levels. While these publications are comprehensive and exhaustive in its scope, it is not possible to perform every analysis to answer every question each reader may have. There is substantially more that can be learned from these data, especially at the county level. For example, you may be specifically interested in the rate of non-violent juvenile arrests in your county. It would be reasonable for you to want to know what the rate has been over the last ten years, how it has changed and how it compares to your neighboring counties. The limits of time and space do not allow The Maryland KIDS COUNT Factbook to contain that level of detail for every county. However we encourage you to use the data contained within these Factbooks to find the answers to those critically important questions.

Many people are intimidated by data and assume that to manipulate and use data requires special training. In fact, armed with a few simple formulas and some words or wisdom regarding responsible use, anyone with paper and pencil can perform calculations that will describe problems, inform possible solutions and help set priorities. We urge you to use the formulas presented below to inform your work.

Calculating Percentages, Rates, Ratios and Change Over Time

Calculating a percentage:

A percent means per 100. For example, 10 percent means 10 out of 100, 50 percent means 50 out of 100. To calculate a percent you must divide the number in a subgroup by the number in the total group and multiply by 100.

Percent = (Number in sub-group ÷ Number in whole group) x 100

Example: Percent births to teens

Formula: (Births to females 15-19 ÷ All Births) x 100

Calculation: (6,971÷ 70,151) x 100= 9.9%

Once your percentages are calculated there a numerous ways you can express them in others ways to maximize their use.

Percentages	Conversion
5%	5 in 100 or 1 in 20
10%	1 in 10 or One-tenth
50%	1 in 2 or One-half
75%	3 in 4 or Three-fourths

Calculating a rate:

To calculate a rate you need three pieces of information: the total group number, the number in your sub-group and the multiplier.

Rate = (Number in sub-group ÷ Number in whole group) x Multiplier

Example: Teen birth rate per 1,000 females 15-19

Formula: (Births to females 15-19 ÷ All females 15-19) x 1,000

Calculation: (6,971÷ 327,918) x 1,000 = 21.2

Calculating a ratio:

A ratio is simply one number divided by another. It conveys the magnitude of the difference between two numbers. You can use this kind of comparison if you have the same measure for two groups for the same year or one group with data for two different years.

For example, in 1997 the infant mortality rate for white babies was 5.3 per 1,000 live births, for African Americans it was 13.6 per 1,000 live births. If you divide the African American rate by the white rate you get the ratio.

Ratio = African American infant mortality ÷ White infant mortality rate

13.6 ÷ 5.3 = 2.6

This tells us that the 1997 infant mortality rate for African Americans is more than two and a half times higher than the 1997 infant mortality rate for whites.

Calculating change over time

Often it is helpful to examine how a data element has changed over the years. You may be interested in knowing the magnitude of the change from the rate at one point in time as compared to another point in time. This calculation is referred to a "rate of change" and the formula for performing it is presented below.

Rate of Change ={(Newer year number ÷ Older year number) -1} x 100

Example: The percentage of births to women receiving prenatal care in the first trimester for 1990 was 75.8%.
The percentage of births to women receiving prenatal care in the first trimester for 1997 was 78.7%.

Calculation: {(78.7÷ 75.8)-1}x 100= 3.8%

The rate of change for the percentage of births to women with early prenatal care between 1990

and 1997 is 3.8%.

Using Data Responsibly

In order to maximize your use of this data or any other data you use in the future here are a few tips on how to use it responsibly.

- Use caution when dealing with small numbers

  Calculating rates and percentages when you only have small numbers of events (death rates are particularly troublesome), or individuals is problematic. These figures may be unstable, unreliable and can be very misleading. If you find the event you are attempting to produce a rate for has less than 10 occurrences you should not produce a rate. Try combining three to five years of data to produce a more stable rate.

- Definitions and methods of collecting of data sometimes change

  When analyzing data over time be aware that the agency that collects the data may change how they define or calculate the data. For example, the Maryland Department of Health and Mental Hygiene has made many changes over the years in how they classify race. For some years they reported rates and events for whites, with all other races combined into one group, with no further disaggregation possible. Currently they have begun to report separately for whites, African Americans, Native Americans and Asians. That means that in earlier years calculating rates for African Americans Native Americans and Asians alone was not possible. Another example is that some agencies change from year to year how they report the same data element. Consider the number of children enrolled in foster care as an example. Depending on how the data are available, the data you receive might be an actual count or it could be a monthly average, it could be an unduplicated count or perhaps it does not take into consideration children who leave the system and the return within the same year. You should always note changes in the way data are defined and reported and convey this to anyone you report the data to.

Low Birthweight

Indicator Definition: *The rate of low birthweight births is the number and percent of babies born weighing 2,500 grams (5.5 pounds) or less at birth.*

State Level Findings: At the State level, the percentage of babies born with low birthweight has increased by 7% over the baseline rate of 8.5% in 1995. The rate increased by 17% during the past decade increasing from 7.8% in 1990 to it's current ten year high of 9.1% in 1999. This rate is one of the highest rates in the country and is 20% higher than the national rate of 7.6%.

Analysis by race reveals that while the rate for African American babies is twice the rate for white babies, the rate of growth for African Americans is significantly slower than the rate of growth for whites. Since 1990, the rate of low-birthweight for white babies has grown by more than 25%. During the same time period the rate for African American babies grew by only 5%. So while the current rate for African Americans is currently twice that for whites, ten years ago it was nearly three times the rate for whites. In essence, the rate of low birthweight for white babies is catching up to the rate for African Americans.

Jurisdictional Findings: Fourteen jurisdiction's rates of babies born with low birthweight worsened over baseline. Four Maryland jurisdictions saw increases in this rate of over 20% over baseline. Both Cecil and Howard counties experienced increases of 20%, while in Somerset and Worcester Counties the increases were 60% over baseline.

Infant Mortality

Indicator Definition: *Infant mortality rate is the number of infants who die before their first birthday per 1,000 live births.*

State Level Findings: Maryland's infant mortality rate has declined by nearly 14% over the past ten years and is currently at its lowest rate in more than 20 years. However, while Maryland's infant mortality rate is clearly trending downward, our rate of decline is slower than most states around the country. Between 1990 and 1998 the national infant mortality rate fell by 20%, while in Maryland during the same time period the infant mortality rate fell by only 10%. In 1998, the national rate of infant mortality was 7.2 per 1,000 live births, 16% lower than the Maryland rate of 8.6 deaths per 1,000. According to the National KIDS COUNT Data Book, during the 1990's Maryland went from being ranked 31st among states on this indicator to it's current position of 41st.

While there has been a decline in the infant mortality rate for African Americans that is consistent in the rate of decline for whites the magnitude of the disparity between whites and African American remains unchanged. We end the 1990's as we began them, with African American babies dying during their first year at a rate nearly three times that of white babies.

Jurisdictional Findings: Our multi-year analysis finds the infant mortality rate has declined in fifteen Maryland jurisdictions. The magnitude of these reductions generally range from as small as 5% to as large as nearly 70%. In the Baltimore Metro area only two jurisdictions had decreases in their infant mortality

rates; Baltimore City and Carroll County's rates declined by 10% and 8% respectively. Howard, Baltimore and Anne Arundel Counties all experienced increases of their rates of 16%, 5% and 3% respectively.

Early Prenatal Care

Indicator Definition: Early prenatal care is the percentage of all births where prenatal care was initiated in the first trimester of the pregnancy.

State Level Findings: In general this indicator is on an upward trend. The percentage of women receiving first trimester prenatal care in 1999 was 84%. This is a nearly 4% increase over the rate in 1995 of 81% and a 10.5% increase from the 1990 rate of 76%. However, there has been a great deal of fluctuation during the intervening years especially for African American women. Between 1997-1999 the percentage of pregnant African American women receiving first trimester prenatal care jumped from 64% in 1997 to 81% in 1998, only to decline by 10% in 1999 to 73%.

Jurisdictional Findings: Every jurisdiction except for Washington County experienced improvement over baseline with regard to this indicator. Washington County's rate decreased by 6.5% from 87% in 1990 to 81% in 1999. Four eastern shore jurisdictions (Caroline, Dorchester, Kent and Somerset Counties) experienced increases of twenty to thirty percent over baseline. Baltimore City continues to lag behind the pack, with a dismal rate of 69.7% which is nearly 10% lower than the rate of the 23rd ranked county (Worcester), and 26% lower than the first ranked county (Carroll).

Healthy Children

Binge Drinking

Indicator Definition: Binge drinking is the percentage of 10th grade students reporting having consumed five or more alcoholic beverages on one occasion during the past 30 days. One serving is defined as a bottle of beer, one wine cooler, one shot glass of liquor or one mixed drink. These data come from the Maryland Adolescent Survey, a self-report survey of Maryland students administered by the Maryland State Department of Education every two years.

State Level Findings: This rate has increased by more than 30% over the baseline rate of 20% in 1992. It is important to note that although this increase is troubling the rate has been essentially stable since 1994 at approximately 25%. Because this data element is only collected every two years and because the processing time by the Maryland Department of Education is lengthy, the most current data available is three years old. We look forward to the release of these data from the 2000 Maryland Adolescent Survey to further evaluate its trend.

Jurisdictional Findings: The latest data reveals that only one Maryland jurisdiction did not see a rise in their rate of 10th grade binge drinking. Charles County's rate remained essentially unchanged over their baseline rate of 27.7%. Every other jurisdiction for which there was 1998 data showed an increase, most increased by at least 20%. Several jurisdictions experienced increases of well over 50%. This is the only indicator which Baltimore City is ranked #1. However, although Baltimore City currently holds the top spot, their most current rate of 17.3% is a 73% increase over their baseline rate o f 10%.

Child Death Rate

Indicator Definition: *Child death rate is a population-based rate of the number of deaths resulting from all causes per 100,000 children between the ages of one and fourteen. A limitation of this indicator (and of all death indicators) is that it does not shed any light on the quality of life of the numerous children who survive life-threatening injury or illness.*

State Level Findings: Our multi-year analysis of our child death rate compares years 1990-95 to years 1995-99 and reveals a nearly 19% reduction from 28.3 deaths per 100,000 to 23 deaths per 100,000 respectively. Over the past ten years, Maryland's child death rate has dropped by one quarter. For white children the rate has dropped even more dramatically, declining by 37% from 23.7 deaths per 100,000 in 1990 to 14.9 per 100,000. During this same time frame the child death rate for minorities (African Americans and all other races), decreased by only 2%. Between years 1998 and 1999 the rate for minorities increased by nearly 14%.

Jurisdictional Findings: Eighteen out of twenty-four Maryland jurisdictions experienced a drop in their child death rate. Our multi-year analysis demonstrates reductions as high as 37% over baseline (Montgomery County). In Baltimore City, where fully one-quarter of the deaths occur, the child death rate has decreased by nearly 23%.

CHILDREN SUCCESSFUL IN SCHOOL

THIRD GRADE READING

Indicator Definition: *Third grade reading is the percent of students scoring satisfactory on tests given as part of the Maryland School Performance Assessment Program.*

State Level Findings: Overall there has been a 37% improvement in this rate over baseline, from 28.6% scoring satisfactory in 1992 to 39.2% scoring satisfactory in 2000. However, analysis of data for the past three years reveals that the rate has been essentially unchanged, ending its' upward trend. In fact, analysis of the most current data from 2000 reveals that Maryland has lost some ground with the percentage of students scoring satisfactory down 6% from its' highest level of 41.6% in 1998 to its' current rate of 39.2%.

Jurisdictional Findings: Overall, the majority of Maryland jurisdictions had increases of at least 50% over baseline. Allegany, Dorchester, Saint Mary's and Worcester Counties have experienced increases in this rate by two-fold or more. While nearly every jurisdiction has seen growth in this rate over baseline, the majority have also seen some magnitude of decline in the last year.

SCHOOL VIOLENCE

Indicator Definition: *Violence related suspension rate is the number of suspensions or expulsions resulting from verbal or physical attacks against teachers, staff or students per 1,000 students. Although guidelines exist, there is no uniform statewide code for determining whether an act warrants suspension or expulsion, so the decision to expel or suspend is up to the discretion of each school administrator. The result is that behavior that warrants expulsion in one school may not warrant it in another, making comparisons of rates problematic. The reader should use caution in interpreting these data.*

State Level Findings: After an alarming one year increase of more than 21% between 1997 and 1998 we are pleased to report the rate of violence-related suspensions seems to be trending downward. The rate has increased by 12% over the baseline rate of 37.5 per 1,000 students in 1993 to 42 per 1,000 students in 2000. However, this most current rate is a 14% decrease from the 1998 rate of 48.9 per 1,000 students.

Jurisdictional Findings: Almost half of Maryland's jurisdictions experienced some decline in this rate. A notable geographic finding is that seven of the nine Eastern Shore counties saw their rates of violence related suspension drop, most by 20% or more over baseline. The most significant reduction occurred in Somerset County where the rate fell by 55% from 181.3 per 1,000 students in 1993 to 81.8 per 1,000 students in 2000. Three jurisdictions in the Baltimore Metro area underwent high magnitude increases in their rates over baseline. Baltimore City, Baltimore County and Howard County saw their rates increase by 50%, 178% and 60% respectively.

SCHOOL ABSENCE

Indicator Definition: *School absence is the percentage of high school students who miss more than*

twenty days of school during the school year.

State Level Findings: The percentage of students missing more than twenty days of school has decreased by nearly 15% since 1993 from 23.8% to 20.3% in 2000. No clear trend is indicated with this data element as it has been wavering between twenty and twenty-five percent since baseline in 1993.

Jurisdictional Findings: The most troubling result from our analysis of this indicator is that in Baltimore City, the 24th ranked jurisdiction, fully one-half of high school students are absent more than twenty days during the school year. While the current rate of 53.1% is a 6% reduction over baseline, Baltimore City's rate is wildly out of line with the rest of the state. The 23rd ranked jurisdiction's (Prince George's County) rate is one-half of Baltimore City's at 25.6%.

CHILDREN COMPLETING SCHOOL

ON TIME GRADUATION

Indicator Definition: *On-time graduation is the percentage of students who complete their high school education within four years. This is calculated by the number of June graduates divided by the number of students enrolled in ninth grade four years earlier. This rate does not include those who drop out of high school and eventually earn their high school diploma or General Equivalency Diploma (GED) and does not take into account entrants and withdrawals during the four year period.*

State Level Findings: This indicator has made little progress since we began tracking it as a KIDS COUNT indicator. The current rate of 74% is an improvement over the baseline rate of 72.8% albeit a very small one of less than 2%. Since 1990 this indicator has been vacillating between 71% and 75%.

Jurisdictional Findings: Fourteen of Maryland's 24 jurisdictions experienced a decline on this indicator - ranging in magnitude from less than 2% to more than 20%. The magnitude of the difference between the #1 ranked jurisdiction (Howard County), and the 24th ranked jurisdiction (Baltimore City) is remarkable, with Howard County's rate being more than 50% higher than Baltimore City's.

HIGH SCHOOL PROGRAM COMPLETION

Indicator Definition: *High school program completion is the percent of graduating students who have completed the minimum requirements for admission into the University of Maryland System in addition to completion of requirements to receive a high school diploma.*

State Level Findings: Since 1991, the percentage of children graduating from high schools having completed the minimum requirements for entry into the University of Maryland system has increased by 32%. This rate has been on a slow but steady upward trend since our baseline year.

Jurisdictional Findings: Only three jurisdictions experienced a decline on this indicator. Charles, Howard and Wicomico Counties rates' fell by five to ten percent. Harford County has shown remarkable growth with respect to this indicator, increasing 173% from 24% in 1991 to 67% in 2000. While there has been positive growth here, it is important to note that nearly half of Maryland's jurisdictions have rates of less than 50%.

CHILD ABUSE AND NEGLECT

Indicator Definition: *The rate of indicated child abuse investigations is a proxy indicator for the occurrence of child abuse and neglect in our community. It is a rate based on the number of indicated child abuse investigations in each county and the state as a whole. Each year in Maryland there are approximately 29,000 child abuse/neglect investigations and each one is given a final disposition of either unsubstantiated, indicated or ruled out. An indicated finding means "there is credible evidence which has not been satisfactorily refuted, that abuse, neglect, or sexual abuse did occur." These data must be interpreted with caution. First because it is not the true occurrence of child abuse or neglect in our community, it is only an estimation of the magnitude of the problem. Another cause for caution are changing regulations within the child welfare system which may affect how many cases are investigated and how they are dispositioned.*

State Level Findings: Over the past ten years this rate has been somewhat volatile. Overall, however there has been an 18% reduction in the rate of indicated child abuse and neglect investigations. Between 1993 and 1995 there was a 33% drop in the rate of indicated child abuse and neglect investigations from 9 per 1,000 children to 6 per 1,000 children. Since then, the rate has fluctuated between 6 per 1,000 and 7 per 1,000.

Jurisdictional Findings: Seventeen jurisdictions have had reductions in their rate of indicated child abuse and neglect investigations. Paramount among them are Calvert, Kent and Saint Mary's Counties whose rates declined by 57%, 65% and 60% respectively. Of the four jurisdictions with increases on this indicator two, Washington and Worcester saw their rates increase by over 100%.

JUVENILE NON-VIOLENT CRIME ARREST RATE

Indicator Definition: *The non-violent juvenile crime arrest rate is the number of arrests of juveniles, ages 10-17 for burglary, larceny theft and motor vehicle theft, per 10,000 youth ages 10-17.*

State Level Findings: Maryland's juvenile non-violent arrest rate has been declining steadily over the past ten years. In 1990, our baseline year, Maryland's rate was 296 arrests per 10,000. In the intervening years the rate has reduced by 27% to it's current ten year low of 215 arrests per 10,000. In the 2000 Maryland KIDS COUNT Factbook we reported a remarkable one year reduction of 13% from 262 in 1997 to 228 in 1998 and hoped we would see a continuation of this downward trend in the future. We are pleased to report that while more modest, there has been a further reduction of this rate between 1998 and 1999 of 6%.

Jurisdictional Level Findings: Sixteen jurisdictions observed improvement on this rate. Most notable among them are Baltimore City, Kent, Montgomery and Somerset Counties which had reductions of 57%, 47%, 58% and 81% respectively. Of the eight jurisdictions whose rates of non-violent juvenile crime arrests grew, three were Eastern Shore Counties and three were Southern Maryland Counties. Saint Mary's County has experienced the greatest increase in this rate, having grown by more than 250% over baseline

from 42 per 10,000 in 1990 to 151 per 10,000 in 1999.

JUVENILE VIOLENT CRIME ARREST RATE

Indicator Definition: *The juvenile violent crime arrest rate is the number of arrests of juveniles for a violent offense (i.e. homicide, aggravated assault, forcible rape, and robbery), per 10,000 youths ages 10-17.*

State Level Findings: During the first half of the 1990's this rate was on a steady upward trend, increasing from 57.8 arrests per 10,000 in 1990 to 71.3 arrests per 10,000 in 1996, a 23% increase. Since 1996 the rate has been clearly trending downward to its' current ten year low of 54.5 which is 6% lower than the baseline rate of 57.8, and nearly 25% less than the 1996 peak rate of 71.3.

Jurisdictional Level Findings: While Baltimore City has the highest rate of juvenile violent crime arrests and has the greatest number of arrests, it has also experienced one of the more marked declines in its' rate over baseline. In 1990, Baltimore City's rate of violent crime arrests was 155.5 arrests per 10,000, ten years later that rate has dropped by more than 30% to 108.7 arrests per 10,000. Twelve other jurisdictions experienced declines in this arrest rate including Carroll, Harford and Saint Mary's Counties.

Child Poverty

Indicator Definition: *Child poverty is the percent and number of all children under 18 with incomes below the U.S. Poverty Threshold. The base year data presented at the state and county levels are from the 1990 census. Data for subsequent years are poverty estimates produced by the U.S. Department of the Census through the Small Area Income and Poverty Estimates program (SAIPE). The most recent SAIPE estimates available at the state and jurisdictional levels are from 1997. These data should be used with caution as they are estimates. While we believe in the validity of these data it important to consider that when producing estimates there is a certain amount of variability that is impossible to control or anticipate. This is taken into consideration by, producing a range within which we can be sure the actual number falls. The poverty estimates in question are produced at the 90% confidence level. This means that we can be 90% confident that the actual number, "percent of children in poverty," is within the range, or confidence level indicated. Confidence intervals for each county and Maryland can be found in the appendix.*

State Level Findings: The most recent poverty estimates available seem to indicate that Maryland has yet to begin a downward trend on the rate of child poverty in our state. The current rate of 14.9% is a 32% increase over the baseline rate of 11.3 in 1989. While there has been some fluctuation in this rate, this is the second year of increases of six to seven percent per year. It is important to note that although this rate has increased by nearly one-third over baseline, Maryland's child poverty rate is 25% lower than the national rate of 19.9%.

Jurisdictional Level Findings: At the jurisdictional level, only Allegany County saw no change in their child poverty rate over baseline. Every other Maryland jurisdiction experienced growth with respect to this rate. With the exception of Baltimore City, the jurisdictions within the Baltimore Metropolitan Area have some of the lowest rates of child poverty in Maryland, ranging from 6.6% (Howard County), to 13% (Baltimore County). By contrast, five of the eight Eastern Shore counties have child poverty rates of 20% or greater and are ranked near the bottom as a result.

Child Support

Indicator Definition: *This indicator is the number and percent of child support cases with active court orders for which any payment has been received. A serious limitation of these data is that a payment can be as little as $1 and still be considered a payment.*

State Level Findings: There has been exceptional progress on this indicator in the past two years. In the 2000 Maryland KIDS COUNT Factbook we reported a remarkable one year increase between 1998 and 1999 of 33% from 38% to 51%. We are pleased to report a similar increase this year. The 2000 rate of 67% is a 32% increase over the 1999 rate of 50.7%. Overall, the percentage of court ordered child support payments is up by 96%.

Jurisdictional Findings: All twenty-four Maryland jurisdictions had growth in this rate. Baltimore City had

the most remarkable change, increasing its' percentage of paying cases from 16.3% in 1993 to an all time high of 45.5% in 2000, a 180% increase. Most other jurisdictions had change that was more moderate, ranging from forty to eighty percent. Only Prince George's County seemed to miss this dramatic change, improving by only 14.3%.

Teen Birth

Indicator Definition: *This indicator is a population-based rate of births to women ages 15-19 per 1,000 women ages 15-19 at the state and county level.*

State Level Findings: Since 1990 Maryland's teen birth rate has fallen by a remarkable 20%. It is especially encouraging that the rate for African American teens is falling at rates equal to or slightly better than white teens. During our baseline year (1995), the teen birth rate of 82.6 per 1,000 females for African American teens was 163% higher than the rate for white teens (31.3 per 1,000). Today, while there is still significant disparity between the races, we find there has been a reduction in the magnitude of the difference to 133%.

Jurisdictional Level Findings: Only four jurisdictions experienced an increase on this indicator over baseline. Most notable among them are Queen Anne's and Washington Counties with increases of 35% and 18% respectively. Howard, Dorchester and Frederick Counties all had rate reductions of 30% or greater.

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